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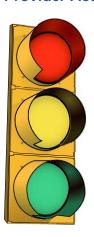
CWF Editing for Method Selection on Durable Medical Equipment Regional Carrier (DMERC) Claims for Epoetin Alfa (EPO) and Aranesp

Note: This article was revised to contain Web addresses that conform to the new CMS web site and to show they are now MLN Matters articles. All other information remains the same.

Provider Types Affected

Durable Medical Equipment (DME) Suppliers billing DMERCs for EPO and Aranesp

Provider Action Needed



STOP – Impact to You

Please note that Medicare DMERCs will only pay claims for *Epoetin Alfa* (EPO) and *Darbepoetin Alfa* (Aranesp) for Method II home dialysis (ESRD) patients.

CAUTION - What You Need to Know

Edits will be added to the Medicare systems to assure that the DMERCs pay claims for EPO and Aranesp only for Method II ESRD beneficiaries.

GO - What You Need to Do

Claims will be denied for Aranesp and EPO where the beneficiary is not a Method II home dialysis patient. Such denials will be noted by a message on the remittance advice (ANSI message 7011) which will state: "Claim not covered by this payer contractor. You must send the claims to the correct payer contractor."

Background

When requirements for a patient care plan and patient selection (per the *Medicare Benefit Policy Manual*, Chapter 11), are met - Medicare will cover EPO or Aranesp used in the home for dialysis patients.

When EPO or Aranesp is prescribed for a home patient, it may be:

 Administered in a facility, e.g., the one shown on the Form CMS-382 (ESRD Beneficiary Method Selection Form), or

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 Furnished by a facility or Method II supplier for self-administration to a home patient determined to be competent to administer this drug.

For EPO or Aranesp furnished for self-administration to competent Method I and Method II home patients the following applies:

- The renal facility bills its Fiscal Intermediary; and
- The Method II supplier bills its DMERC.

A Method II beneficiary is one who has chosen home dialysis and has chosen via Form CMS-382 to deal with a supplier of home dialysis equipment and supplies.

No additional payment is made for training a prospective self-administering patient or retraining an existing home patient to self-administer EPO or Aranesp.

Method II patients who self-administer EPO or Aranesp will only be able to obtain it from their Method II supplier, or from a Medicare certified ESRD facility.

In this case, the DMERC will pay at the same rate that applies to facilities. Program payment cannot be made for EPO or Aransep furnished by a physician to a patient for self-administration.

Additional Information

The Medicare Claims Processing Manual (Pub. 100-04), Chapter 8 (Outpatient ESRD Hospital, Independent Facility, and Physician/Supplier Claims), Section 60 (Separately Billable ESRD Items and Services), Subsections 60.4.4 and 60.7.4 have been revised to reflect this change. The revised part of the manual is attached to the official instruction issued to your DMERC regarding this change. This instruction may be found at http://www.cms.hhs.gov/Transmittals/downloads/R447CP.pdf on the CMS web site.

For additional information relating to this issue, please refer to your DMERC. Please find the toll-free phone number for your DMERC at

http://www.cms.hhs.gov/MLNProducts/downloads/CallCenterTollNumDirectory.pdf on the CMS web site.